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Docket No. 0575/51917-CA-PCT-US/JPW/BJA/LM

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): David J. Pinsky, et al.
Serial No. : 10/679,135 Examiner: John Pak
Filed : October 3, 2003 Group Art Unit: 1616
For : A METHOD FOR TREATING ISCHEMIC DISORDER USING CARBON MONOXIDE

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Date: July 9, 2009

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

 A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

 No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	14 -	* 43 =	*** 0 X	\$26	\$52	= 0	
Indepen- -dent Claims	1 -	** 10 =	*** 0 X	\$110	\$220	= 0	
Multiple Dependent Claim(s) Presented For First Time <u> </u> Yes <u> X </u> No				\$195	\$390	= 0	
				TOTAL ADDITIONAL FEE \$ 0.00			

- ¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.
* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".



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Amendment Transmittal Letter
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The following are also enclosed:

- ☐ One additional copy of this Amendment Transmittal Letter
- ☒ Return Receipt Postcard
- ☐ An Information Disclosure Statement, including Form PTO-1449
(Copies of citations included: Yes ☐ No ☐
and a fee of \$ included)
- ☒ A Petition for an Extension of Time, including a fee of
\$ 245.00 for a Petition for 2 Month(s) Extension of Time
- ☒ Other (identify): New Declaration and Power of Attorney as Exhibit A

THE TOTAL FEE DUE IS \$ 245.00.

☒ A check in the amount of \$ 245.00 is enclosed.

☐ Please charge Deposit Account No. in the amount of
\$.

☒ The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125
as follows:

- ☒ Fees under 37 C.F.R. §1.16 for the presentation of extra claims
- ☒ Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

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I hereby certify that this
correspondence is being deposited this
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John P. White Date
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